

CHANCE - PRTF Waiver Grant

Crisis Intervention Protocol, Plan & Steps

Definition

Crisis Intervention is a time-limited intensive therapeutic intervention provided by a qualified, enrolled clinician. Crisis Intervention is designed to follow an abrupt substantial change in behavior toward the severe impairment of functioning and/or a marked increase in personal distress. The presence of co-occurring substance abuse during a period of psychiatric crisis may contribute to additional risk and should be addressed in an integrated fashion. Interventions will be aimed at stabilizing specific occurrences of child/family crises as they arise or when a child is at imminent risk of harm to self or others, psychiatric hospitalizations, or more restrictive placement. Crisis intervention must be provided on a 24-hour, 7 day a week basis. Providers of Crisis Intervention will be required to address all crisis situations that a client may present.

Client stabilization and crisis intervention is employed to:

- Identify the precipitant(s) or causal agent(s) that has resulted in the crisis
- Reduce the immediate personal distress felt by the client
- Ensure the safety of the client and his/her family
- Reduce the chance of future crisis situations through the implementation of preventive strategies.

Service may be rendered either face-to-face or via telephone. The intent of this service is face-to-face contact, but services may be provided by telephone under extenuating circumstances. Documentation must support extenuating circumstances that warrant services provided by telephone.

Special Restrictions

If the provider bills over five hours for one episode of Crisis Intervention, the Clinical Care Coordinator will review documentation prior to reimbursement.

Service Documentation

Crisis Intervention services are required to be listed on the Plan of Care. A Clinical Service Note must be completed to document provision of crisis intervention services for each client contact and should include the following:

1. The focus of the session or nature of the crisis,
2. The content of the session,
3. The intervention of the staff,
4. The response of the client to the intervention(s) of the staff,
5. The client's status at the end of the session,
6. The disposition at the end of the session.

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The Case Manager helps the Service Plan Development Team match objectives from the Plan of Care and the Crisis Plan that are specific to the child/youth behaviors that may occur in a crisis.

Developed by the Service Plan Development Team

Date _____

Case Manager Name _____
(Please print)

Case Manager Signature _____
Date: _____

Parent/Guardian Name _____
(Please print)

Parent/Guardian Signature _____
Date: _____

Disclaimer statement: This form is to be used only as an example of actions to be performed in emergency and crisis situations, and is not inclusive of every example that may occur in situations of emergencies or crises. The above parent/guardian assumes full responsibility for their decisions made on behalf of their child(ren) regarding the most appropriate action to be taken in the event of an emergency or crisis situation.

Crisis Intervention Guidelines

The following are guidelines for the parent/guardian in the event of a medical or non-medical crisis:

A. For Medical Crisis/Emergency

Parent/guardian follows the appropriate steps below:

1. If there is a threat to the child/youth's life:
 - a. Remove any potential means by which child/youth can hurt him/herself.
 - b. Transport child/youth to the nearest ER
 - c. Call counselor and inform them of your actions
2. If unable to transport child/youth, call local Police @ _____ or 911.
3. When safety is reached parent/guardian calls the appropriate clinical staff to alert of emergency actions.

Clinical staff

Name _____
(Counselor) (phone #)

Name _____
(Supervisor) (phone #)

Name _____
(Physician/Psychiatrist) (phone #)

B. For Non-Medical Crisis/Emergency Example: In angry moments the child/youth has consistently used objects to throw at parent/guardian or siblings, the Plan of Care would address anger issues and the crisis plan would address actions of parent/guardian or others that would de-escalate the child/youth in crises.]

Parent/guardian follows the appropriate steps below:

a. Parent calls the Case Manager @ _____
(phone #)

OR

b. Parent calls the Case Management Agency Crisis Line @ _____
(phone #)

OR

c. Parent calls the Caregiver Peer Support Specialist @ _____
(phone #)

OR

d. Parent calls the on call Clinical Staff as follows:

Name _____
(Counselor) (phone #)

Name _____
(Supervisor) (phone #)